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REPORT MAY PAVE WAY FOR NEW PSYCHIATRIC HOSPITAL

Would Replace Worcester and Westboro State Hospitals

The Department of Mental Health wants to explore the possibility of replacing both Worcester and Westboro State Hospitals with a new state-of-the-art inpatient facility.

A report delivered to the State Legislature also says that 268 adult inpatient clients are ready to leave if community discharges and follow-up treatment, rehabilitation and support services are adequate. DMH would not shift the burden of responsibility to general hospital psychiatric units or private psychiatric hospitals.

“A comprehensive system of mental health care relies on a continuum of two key components, inpatient and community-based care,” said Dr. Elizabeth Childs, DMH commissioner.

Built in 1833, Worcester State Hospital was the first public psychiatry facility in the United States. Westboro opened its doors in 1889. The report notes that multi-million dollar capital projects will be required to keep both facilities in operation over the next ten years. They include utility system replacements, exterior façade repair and life safety improvements.

“Worcester and Westboro State Hospitals have served the Commonwealth well for a combined total of 236 years,” said Health and Human Services Secretary Ronald Preston. “It’s now time to build on that proud history, and provide clients with a modern facility that takes advantage of the advances in care that have occurred over the last half century.”

The report proposes a new facility in Central Massachusetts to replace the 156 adult beds in Worcester and 198 in Westboro.

A variety of state agencies recommended in the report would develop a planning process that would include design features, costs, financing strategies and a timeline for development and construction.

“Physical changes in inpatient environments can positively or negatively affect the well being of clients and staff,” said Dr. Childs, the former president of the Massachusetts Psychiatric Society. “Thoughtful renovations can result in decreased rates of client violence, enhanced client self image and fewer staff absences.”

The state currently has capacity for 900 adults at eight different facilities. The report recommends lowering that to 740. Funding community placements would be done through \$17.4 million in re-investment dollars resulting from the closing of 160 adult beds.

It costs approximately \$128,000 per bed per year to provide adult continuing care inpatient services in a DMH hospital. To discharge an inpatient client and provide necessary community services costs the state approximately \$65,000 per year.

In 1999 the Supreme Court ruled that the Americans with Disabilities Act requires states to provide care for disabled persons in community-based, rather than institutionalized settings, when clinically appropriate.

“We want to be able to provide the best care for persons with severe and persistent mental illness whether they are in a hospital or in the community,” said Dr. Childs.

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